

**CAMPAIGN FINANCE REPORT  
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: ☒ Yes ☐ No

Instructions for completing schedules are on the back of each schedule.

**COMMITTEE IDENTIFICATION**

Name of Committee: BERNARD FOR BROWN COUNTY EXECUTIVE

Street Address: 1044 WRIGHTSTOWN RD

City, State and Zip Code: DE PERE WI 54115

SEAL L. J. BROWN COUNTY  
APR 9 2019

Received  
OFFICE USE ONLY

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

**NAME OF REPORT**

☐ January Continuing ☐ Pre-Primary ☒ <sup>2019</sup> Spring ☐ Fall ☐ Special ☐ Termination Report also complete Schedule 4  
☐ July Continuing ☐ Pre-Election  
☐ September Continuing

**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

**1. RECEIPTS**

	Column A This Period	Column B Calendar Year-To-Date
1A. Contributions (including Loans) from Individuals	\$ 2,562.43	\$ 2,562.43
1B. Contributions from Committees (Transfers-In)	\$ 0	\$ 0
1C. Other Income and Commercial Loans	\$ 0	\$ 0
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ 2,562.43	\$ 2,562.43

**2. DISBURSEMENTS**

	Column A This Period	Column B Calendar Year-To-Date
2A. Gross Expenditures	\$ 2,552.18	\$ 2,552.18
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 2,552.18	\$ 2,552.18

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ 0
Total Receipts	\$ 2,562.43
Subtotal	\$ 2,562.43
Total Disbursements	\$ 2,552.18
<b>CASH BALANCE END OF REPORT</b>	\$ 10.50
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$ 0
<b>LOANS</b> (Balance at the Close of This Period-3B)	\$ 0

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer <u>MARK BERNARD</u>	Signature of Candidate or Treasurer <u>Mark Bernard</u>	Date: <u>4/8/19</u>
	Email: <u>BERNARD-MARK@YAHOO.COM</u>	Daytime Phone: <u>920.246.5729</u>

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss. 11.1400, 11.1401, Wis. Stats.

ETHCF-2L (Rev. 01/16) The Government Accountability Board prescribes this form. Completed forms must be filed with your local clerk.

**SCHEDULE 1-A**
**RECEIPTS**

Contributions (Including Loans) From Individuals

 Page 1 of 2

Complete Committee Name

**BERNDT FOR BROWN COUNTY EXECUTIVE**

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (If year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
1/12/19	MARK BERNDT 1044 WRIGHTSTOWN RD DE PERE WI 54115 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	CANDIDATE	\$20 <sup>00</sup>	\$20 <sup>00</sup>
2/12/19	MARK BERNDT Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	" "	\$200.00	220.00
2/27/19	ROBERT WELSHING 2140 WESTLINE RD GREEN BAY WI 54313 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	RETIRED	\$500 <sup>00</sup>	\$720 <sup>00</sup>
3/4/19	MARK BERNDT Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	CANDIDATE	\$100 <sup>00</sup>	\$820 <sup>00</sup>
3/8/19	CHARLES RAMSEY 3316 STONE RIDGE DR GREEN BAY WI 54313 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		\$500 <sup>00</sup>	\$1320 <sup>00</sup>
3/8/19	EMILY & GREG DOUGHERTY 2136 WESTLINE RD GREEN BAY WI 54313 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		\$500 <sup>00</sup>	\$1820 <sup>00</sup>
3/12/19	MARK BERNDT Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	CANDIDATE	\$80 <sup>00</sup>	\$1900 <sup>00</sup>
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$1900 <sup>00</sup>	1900 <sup>00</sup>
TOTAL ITEMIZED CONTRIBUTIONS			\$	
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$	



**SCHEDULE 1-A**
**RECEIPTS**  
**Contributions (Including Loans) From Individuals**

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Complete Committee Name

BERNDT FOR BROWN COUNTY EXECUTIVE

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (If year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
3/21/19	MARK BERNDT 1044 WRIGHTSTOWN RD DE PERE WI 54115 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	CANDIDATE	\$500 <sup>00</sup>	\$2,400 <sup>00</sup>
3/28/19	MARK BERNDT Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	" "	\$20 <sup>00</sup>	\$2,420 <sup>00</sup>
4/2/19	MARK BERNDT Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	" "	\$142.43	\$2,562.43
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 662.43

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

\$2,562.43

**SCHEDULE 2-A**
**DISBURSEMENTS**  
**Gross Expenditures**

 Page 1 of 1

Complete Committee Name

**BERNDT FOR BROWN COUNTY EXECUTIVE**

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
2/21/19	ONLINE CANDIDATE DALEY PROFESSIONAL WEB SOLUTIONS PO BOX 402 MONTGOMERY NY 12549 Check If: <input type="checkbox"/> In-Kind Offset	WEBSITE	\$29 <sup>00</sup>
3/3/19	SUPER CHEAP SIGNS 4200 WATERFORD CENTRE STE 100 AUSTIN TX 78758 Check If: <input type="checkbox"/> In-Kind Offset	YARD SIGNS	\$484.50
3/12/19	BROWN COUNTY CLERK 305 E WALNUT ST GREEN BAY WI 54305 Check If: <input type="checkbox"/> In-Kind Offset	VOTER LIST	\$80 <sup>00</sup>
3/24/19	ONLINE CANDIDATE DALEY PROFESSIONAL WEB SOLUTIONS PO BOX 402 MONTGOMERY NY 12549 Check If: <input type="checkbox"/> In-Kind Offset	WEBSITE	29 <sup>00</sup>
3/25/19	LAMAR PO BOX 5840 DE PERE WI 54115 Check If: <input type="checkbox"/> In-Kind Offset	BILLBOARDS	\$1350 <sup>00</sup>
4/1/19	WRIGHTSTOWN SPIRIT 1900 CROOKS AVE KAUKAUNA WI 54930 Check If: <input type="checkbox"/> In-Kind Offset	NEWSPAPER ADS	\$437.25
4/2/19	ROYAL CREST PRINTING PLUS 3600 VELD AVE GREEN BAY WI 54313 Check If: <input type="checkbox"/> In-Kind Offset	FLYERS	\$142.43

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

\$ 2552.18

TOTAL ITEMIZED EXPENDITURES

\$

TOTAL UNITEMIZED EXPENDITURES

\$

TOTAL EXPENDITURES

\$ 2552.18

**SCHEDULE 2-B**

**DISBURSEMENTS**  
Contributions To Committees  
(Transfers-Out)

Page 1 of 1

Complete Committee Name

*BEERDT FOR BROWN COUNTY EXECUTIVE*

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE		\$	0
TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES		\$	0

**SCHEDULE 3-A**
**Incurred Obligations Excluding Loans  
ADDITIONAL DISCLOSURE**

Page 1 of 1

Complete Committee Name

BARNST FOR BARN COUNTY GASLINE

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code of Creditor	Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period
/ /					
		Nature of Debt (Purpose)			
/ /					
		Nature of Debt (Purpose)			
/ /					
		Nature of Debt (Purpose)			
/ /					
		Nature of Debt (Purpose)			
/ /					
		Nature of Debt (Purpose)			
/ /					
		Nature of Debt (Purpose)			
/ /					
		Nature of Debt (Purpose)			

SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE

\$

TOTAL ITEMIZED OBLIGATIONS

\$

TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS

\$

TOTAL INCURRED OBLIGATIONS

\$

6

\*\*\*End of Report\*\*\*